

Catering Request Form

Event Date			Set Up Time		
Event Name	·		1		
Event Time			# of Guests		
Location			Contact		
Set up instru	actions: (Specify cloth lines			
BEVERAG	E SERV	ICE:			
Coffee Service		Soda Service	Ice Water Service	Other (list below)	
BREAKFAST:		Select One			
Cafeteria	Buffet	Menu	Continental	Other (list below)	
LUNCH: Select One					
Cafeteria	Buffet	Menu	Box Lunch	Soup & Sandwich	Extra Special
DINNER: Select One					
Cafeteria	Buffet	Menu	Soup & Sandwic	ch Extra Special	
*Coffee serv	vice is pro	vided with meals			
SNACKS:					
Vegetable Platter Cookie Platter		Fruit Platter	Cheese & Cracker Platter		
Specify men	u choices	s for buffet, menu	or special requests/oth	er:	

Attach additional sheet if necessary. Return form to Nutrition Services with a 48 hour notice.